

FAQS – Community health services frequently asked questions













CHPs key to universal healthcare

Kenyans will now be served at their homes in the spirit of our transformative act to serve the people, says **President Ruto**

In a groundbreaking move towards Universal Health Coverage, President William Ruto distributed kits to over 100,000 Community Health Promoters across Kenya. These frontline workers, now equipped and supervised by professional medics, will bring quality medical care directly to Kenyan doorsteps.

President Ruto emphasized the government's commitment by ensuring remuneration for these promoters and urged them to serve with dedication. Each promoter, tasked with serving 100 homes, will provide essential preventive and promotive health services equipped with basic screening equipment and

smartphones for efficient communication. Additionally, the government plans to bolster the healthcare workforce by employing an additional 20,000 healthcare workers. This strategic move aims to improve the healthcare worker-to-population ratio, ensuring that communities have adequate support to address their healthcare needs effectively.

This initiative heralds a new era in Kenya's healthcare system, where quality medical care is no longer a distant reality but a tangible promise delivered to every doorstep.

COMMUNITY HEALTH **PROMOTERS**

CHPs are the backbone of our primary healthcare system and are the cog of our #AfyaNyumbani program. They work tirelessly to promote health, provide essential care, and bridge the gap between communities and facility based healthcare, says CS Nakhumicha Wafula.

President William Ruto's commitment to ensuring universal health coverage (UHC) for all Kenyans has been resolute since taking office in 2022. With the passage of the four UHC Bills into law by Parliament, significant strides have been made towards making healthcare more affordable and accessible nationwide.

The cornerstone of this initiative lies in the recruitment of 107,831 Community Health Promoters across the country. These dedicated individuals serve as the linchpin upon which the realization of UHC goals rests. As Health Cabinet

Secretary Nakhumicha Wafula aptly stated, "To our Community Health Promoters - you are the pillar upon which Universal Health Coverage is built; Kenyans are banking on your hard work, your dedication and resolve to realize UHC goals."

Through their tireless efforts and unwavering dedication, these community health promoters embody the spirit of UHC, ensuring that every Kenyan has access to quality healthcare services when needed. Their role is not just pivotal; it's indispensable in transforming the healthcare landscape of Kenya for the better.





Empowering Community Health Promoters

The integration of community health promoters into the fabric of Kenya's primary healthcare delivery is not just a strategy, but also a paradigm shift aimed at transforming lives of rural communities

"I must wake up by 5 am every morning, to prepare my children to go to school, then feed our animals before embarking on my mission of serving 25 patients every day. It's hectic but it's a commitment we made to help our people." MS OGONGO.

A spot check by the Presidential Communication Service team in Narok, Homa Bay, Nyamira and Migori counties showed that the recruitment of Community Health Promoters (CHPs) is transforming lives in rural communities in the provision of medical services.

In our journey by boat from Suba to Ngodhe Island early in the morning, a CHP Tom Otata, was already through with three patients- one was diagnosed with high blood pressure, one had malaria while the third person had a clean bill of health.

"Our work is to wake up every day and tour the assigned homesteads to check on the health of our people.

Most of them are not able to travel to health centers far from their homes." said Mr Otata.

Another CHP in Suba Pamela Auma said the medical kits supplied have greatly helped people in rural areas check on pressure, sugar and malaria levels.

In Kuria West, Migori Subcounty, we found several CHPs including Ngongoke Rioba working round the clock to serve their communities.

"We trek for about 5 kilometres every day to cover the number of people we are assigned to serve depending on the weather conditions. Sometimes we walk through thick thickets or wet grounds to get into the homes of our people," said Ms Rioba.

In Kitutu Masaba, Nyamira County, heavy downpour could not deter Esther Ogongo from executing her duties.

"I must wake up by 5 am every morning, to prepare my children to go to school, then feed our animals before embarking on my mission of serving 25 patients every day. It's hectic but it's a commitment we made to help our people," said Ms Ogongo.

The county has 1,440 CHPs serving 100.000 households.

While in Narok County, we travelled for 100 kilometres on a rough road to meet Joseph Sirikua and Alice Kesho serving their people at Naarosura village.

Because of the expansive area, characterized by bad terrain and communication network problems, CHPs are forced to hire motorbikes in most cases to reach their target audiences.

"We are also forced to travel through the Masai Mara National Park and that's why we must use motorcycles to reach the number of patients we have been assigned to cover every day," said Mr Sirikua.

CHPs conduct home visits, provide health education including need for the construction of pit latrines, provide basic first aid treatments, data collection and reporting, community surveillance on disease outbreaks among other activities.

But the truth of the matter remains that CHPs in rural Kenya are the backbone of a healthy society, volunteering their time to care for those who need it most.

These individuals are held in high esteem and are trusted by the community in their village, because they are part and parcel of the locals.

They are ordinary people doing extraordinary things—husbands, wives, parents, and friends earning an income from efforts such as small-scale farming and offering bike transport.



In this regard, CHPs, for half of their day, these health workers also provide preventive and promotive health services to hundreds of households for which they are responsible, alongside other volunteer colleagues within their community health unit.

They are often the first line of response in a health crisis and are at times the only link between patients and primary health facilities.

Although their work is crucial to improving health outcomes in communities across Kenya, they have, until now, carried out this work with no salary or, at best, with irregular stipends but are still committed in their work.

But once they are well trained on how to operate the medical kits and receive formal recognition in the health system, have their basic commodities they need to work efficiently and digitally record all patient engagements, CHPs will greatly transform the lives of rural communities as far as universal health coverage is concerned.



The integration of community health promoters into the fabric of primary healthcare delivery is not just a strategy; it is a paradigm shift.

At the heart of this transformative model is a focus on preventive healthcare. Community health promoters are at the forefront of disseminating vital information on nutrition, hygiene, and disease prevention.

By addressing health challenges at their roots, these promoters contribute significantly to reducing the burden on the healthcare system and enhancing the overall quality of care. Importantly, this model recognises the critical need for robust referral pathways.

Community health promoters serve not only as primary points of contact but also as conduits for seamless transitions within the healthcare continuum. Their role extends beyond prevention, encompassing early detection and referral to higher-level health facilities when necessary.

The integration of community health promoters into the fabric of primary healthcare delivery is not just a strategy; it is a paradigm shift.

By recognising and nurturing the symbiotic relationship between these promoters and the quality-of-care provision, we pave the way for a healthcare landscape that is not only more effective but also more compassionate and inclusive.

The writer is the Regional Director of The Options East and Southern Africa

Kenya's Vital Health Link: CHPs

KENNETH MACHARIA

Community health promoters play a pivotal role in implementing Kenya's Community Health Strategy.

This importance was affirmed by President William Samoei Ruto through an investment to bring in a workforce of 107,831 dedicated community health promoters, each equipped with essential knowledge and tools, to serve around 100 households each across Kenya.

This model creates approximately 10,000 community health units, forming part of a broader primary care network (PCN).

These units are closely linked to level two and level three health facilities, providing a hub-and-spoke system with level four facilities at the hub.



CHPs key in tackling teen pregnancies, HIV/AIDs

GOVERNOR WANGA

Homa Bay Governor has lauded Community Health Promoters for their central role in advancing medical care to Kenyans. She explained that so far the officers have been key in the early detection of diseases, thereby taming infant and maternal mortalities.

"Timely responses and the provision of accurate information have been key drivers of this development," she noted in an interview. On this account, the Governor said it is now time for the health workers to escalate their services to confronting teen pregnancies and HIV/AIDs. Homa Bay County has been grappling with high HIV/AIDs among adolescents and malaria infections.

At least 2,500 people are working as community health promoters in the county.



Homa Bay Governor Gladys Wanga with CHP Lawrence Onyango during distribution of medical kits in Homa Bay town on November 10, 2023.
Image: ROBERT OMOLLO | The Star Newspaper.





Kenya's Community Health Promoters Lead the Way with Technology

The CHPs are doing a great job in providing promotive and preventive healthcare services. They are helping the people detect lifestyle diseases early, **remarks Deputy President Rigathi Gachagua.**

In Kenya, a silent revolution is underway in the realm of healthcare, spearheaded by an army of unsung heroes: Community Health Promoters (CHPs). Armed not only with compassion but also with technology, these frontline warriors are transforming the way healthcare is delivered in rural communities.

Equipped with smartphones loaded with medical apps and communication tools, CHPs are bridging the gap between remote villages and healthcare facilities. Gone are the days of relying solely on physical infrastructure; now, healthcare advice, instructions, and even consultations are just a tap away.

"As we shift our emphasis from curative measures. The smartphones, locally assembled and provided by Safaricom, will empower our CHPs with the tools necessary to enhance healthcare accessibility and effectiveness in their communities," adds CS of Health CS Nakhumicha S. Wafula.

In the sprawling landscapes of Kenya's countryside, where reaching a hospital can be a journey of hours or even days, this integration of technology is nothing short of revolutionary. Through mobile platforms, CHPs can provide timely medical information, conduct virtual consultations, and even coordinate emergency responses with healthcare professionals.

But the impact of technology doesn't stop there. With the aid of digital tools, CHPs are efficiently collecting and analyzing data on community health trends. This invaluable information not only informs local healthcare strategies but also contributes to national-level efforts in disease surveillance and prevention.

"What we have done is to create a structure and an appreciation for them for the good work they are doing in the households to ensure they have a consistent monthly stipend at any given time," emphasizes PS of the State Department for Public Health and Professional Standards Mary Muthoni.

Moreover, technology empowers CHPs to deliver targeted health education and awareness campaigns, addressing prevalent issues such as maternal health, infectious diseases, and nutrition. By leveraging social media platforms and messaging apps, they can disseminate vital information to large audiences, breaking down barriers to healthcare access and fostering healthier communities.

The fusion of technology and grassroots healthcare delivery embodied by Kenya's Community Health Promoters is a testament to the country's commitment to innovation and inclusivity in healthcare. As they continue their tireless efforts on the frontlines, armed with smartphones and unwavering dedication, they are not just bringing healthcare closer to home but paving the way for a healthier, more connected future for all Kenyans.



Health Promoters turning wheel of healthcare

In our country, UHC goes beyond just making healthcare accessible; it puts great emphasis on providing financial security, denotes Mary Muriuki.



MARY MUTHONI

Universal health coverage (UHC) is a global plan that aims to ensure everybody accesses quality medical care without hardship.

In Kenya, the push for UHC gained momentum with President William Ruto's dedication to the Bottom-Up Economic Transformation Agenda (BETA).

At the heart of this transformative effort is the crucial role played by community health promoters (CHPs), who are leading a revolution in the healthcare system.

In our country, UHC goes beyond just making healthcare accessible; it puts great emphasis on providing financial security.

The government plays a vital role in this endeavour, having made significant strides by providing kits to 100,000 CHPs.

This is supported by crucial legislation and the official launch of the programme.

It is a comprehensive approach that not only acknowledges the invaluable contributions of CHPs but also tackles the wider issue of limited healthcare professionals in Africa.

CHPs have a wide range of responsibilities—from identifying potential health issues early and keeping an eye on them to connecting communities with primary healthcare facilities.

Each promoter is responsible for approximately 500 people.

They are the first ones to respond during health emergencies and play a vital role in ensuring healthcare for those in need.

Ms Muthoni is the Principal secretary, State Department for Public Health and Professional Standards.



What is a community health unit?

This is a health service delivery structure within a defined geographical area covering a population of approximately 5,000 people. Each unit is assigned 1 Community Health Assistant (CHA) and 10 community health promoters who offer promotive, preventative and basic first aid. Oversight is provided by a Community Health Committee (CHC), composed of 5-7 members, ensuring community involvement and accountability. Moreover, each Community Health unit maintains a vital link to a primary healthcare facility, fostering seamless coordination and access to comprehensive healthcare services.

Who are Community Health Promoters?

Community Health Promoters (CHPs) are trained members of the community who work as a link between the community and formal health facilities. CHPs play a crucial role in addressing health inequalities by bringing essential health services closer to the people, especially those in rural and underserved areas. Further they act as link between the community and formal health facility.

Can I become a Community health promoter?

Community health promoters are selected in a public baraza by the community members to serve them in matters health having met the following requirements:

- is a citizen of Kenya;
- is above the age of 18 and is of sound mind:

- is a responsible and respected member of the community;
- understands the role of a community health promoter;
- is a resident of the respective community for a continuous period of not less than five years prior to the appointment date:
- is literate and can read and write in at least one of the national languages and the local language; and
- is not disqualified for appointment to office by the above criteria of by any other

What do the CHPS do? Why do we need them?

CHPs are often the first point of contact for people needing health care, especially in underserved and remote areas and are a cost-effective way to deliver health care. Specifically, they:

- Visit households to deliver key health messages on health promotion and disease prevention.
- Identify signs and symptoms of diseases, dangers and conditions, manage minor ailments like diarrhoea with support from the community health assistants and refer those outside their scope to the health facility.
- Ensure all households have good WASH status which includes a functional latrine/toilet, hand washing facilities, refuse disposal area and have access to safe drinking water.
- Promote healthcare-seeking behaviour and compliance with treatment and advice.
- Promote appropriate home-based care for the sick, supported by CHAs and link facilities.
- Acts as a link between the community and the health facility.

How many CHPs do we have?

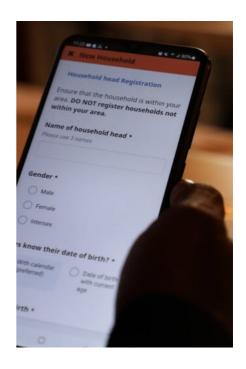
Currently, there are 107,831 CHPS in the country distributed across the 47 counties based on the population and geographical characteristics.

How do I know my CHP?

CHPs are assigned to the households within their areas of residence they offer services and are expected to register the households as they introduce themselves to the members. If you do not know your CHPs you can ask your community members, local authorities like the chief or village elder or the nearest health facility.

Are Community health promoters government personnel?

CHPs are the primary health care providers in the level one service of the government health system delivery. They are not on payroll however they are facilitated with a stipend from national and county government on a 50-50 basis.





















The Journey of e-CHIS in Revolutionizing Healthcare

Community Health Promoters Program has achieved remarkable milestones in community health service delivery.

The journey of Community Health Information System (e-CHIS) began with a vision to bridge the gap between communities and healthcare facilities, to bring care closer to homes. For years, accessing healthcare meant long journeys, prohibitive costs, and often, missed opportunities for timely intervention. But now, with e-CHIS, the narrative is changing. Through real-time data collection, Jane can identify health trends, track disease outbreaks, and tailor interventions to meet the unique needs of each household.

The impact of e-CHIS is profound. With over 15 million Kenyans reached and 3 million households visited, its reach extends far beyond the confines of clinics and hospitals. For individuals like Mwai, a father of three, it meant timely screenings for blood pressure and blood sugar, catching warning signs before they escalated into health crises. With 85,000 referrals made for facility-based healthcare, lives have been saved, and futures secured.



Digitally Enabled Community Health Promoters Save Lives

In late March, a community member knocked on Joseph Barasa's door at 10 pm while holding her eight-month-old baby. The mother, clearly shaken, couldn't go to any of the public health facilities due to the health workers' strike. Going to a private hospital was too costly. Barasa, a trained community health promoter (CHP), recalls the baby's temperature was 39.2 degrees Celsius.



CHP, Stella Tiway educating Ebenyo Sukuta about complementary feeding with pictorial illustration, Isiolo, Kenya

A malaria rapid diagnostic test conducted by the CHP came out positive. Luckily, Barasa had just restocked medical supplies at the health facility, so he prescribed artemether-lumefantrine (AL) and paracetamol syrup. "I administered the first dose of a single tablet of AL and instructed the worried mother to give the baby her second dose in the next eight hours. I also advised her to call me if the toddler's health deteriorated," says Barasa. The following day when he called the mother, she was calmer, and the baby had responded well to treatment. Unlike thousands of others who succumb to this preventable and treatable disease, the baby had a full recovery.

According to the World Health Organization, children under the age of five account for 80 percent of malaria deaths across the continent. 2020, 481,500 children died of malaria while in Kenya, 12,000 children still die of malaria as reve aled by the Kenya Malaria Indicator Survey 2020.

To prevent child deaths from malaria and other early childhood diseases, Living Goods collaborates with governments to strengthen their community health system s. Currently, we support a network of more than 11,400 digitally enabled, equipped, supervised, and compensated community health promoters who deliver care on call to families in their communitiesin Kenya, Uganda and Burkina Faso . We believe that government s owning and leading their community health system s is essential for sustaining health impact at scale.

In 2018, Living Goods started pivoting towards co-implementation through a government - led approach starting with Isiolo County . Building on the learnings we subsequently scaled into Kisumu, Vihiga, Busia counties and exploring other partnerships including offering advisory services to county governments and partners. We became the first organization to make community health data interoperable with the government's national health information system (KDHIS2) and influenced the development of progressive policies around digital health to improve health outcomes at



Signing ceremony Vihiga County co-implementation.

scale. We actively shared our expertise and evidence with national governments embarking on scaling digital initiatives and have built momentum for other crucial components necessary for an effective community health workforce.



Kisumu County team during an experience sharing session with MoH and CHU4UHC partners.

With the Kenyan Government's leadership, Living Goods and the Community Health Units for Universal Health Coverage (CHU4UHC) partners have been instrumental in supporting the counties to train and mentor CHPs like Barasa in the use ofdigital tools.

"With the help of the electronic Community Health Information System (eCHIS) app, we have been diagnosing malaria, diarrhea and pneumonia among children below five years and supplying them with the right dose of drugs to manage the conditions," says Barasa.

Living Goods believes that a functional and sustainable community health system is the foundation for Universal Health Coverage. Whilst Kenya has made significant progress in advancing primary $\ \, \text{health care at the community level} \quad \, \text{, \ effective \ community health}$ systems need a wholistic approach accompanied by a comprehensive support package for the CHPs to be effective.

Busia County's Governor, Paul Otuoma, is keen on the sustainability of the CHP program. "I wish to see more resources channeled towards primary health care (PHC) to reduce focus on curative health. PHC can only be achieved where CHPs are well supported or professionalized. We need more partners on board to ensure the sustainability and effective realization of digitization." Living Goods is committed to providing continuous support in the country's' work to institutionaliz e eCHIS. While what lies ahead is exciting, we acknowledge that the journey is far from complete, particularly in securing sustained funding for community health













